Franciscan Health System

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MAY 2 4 2006

CERTIFICATE OF NEED PROGRAM DEPARTMENT OF HEALTH

May 23, 2006

Janis Sigman, Manager Certificate of Need Program Department of Health P.O. Box 47852 Olympia, WA 98504-7852

Dear Ms. Sigman:

Please accept this letter as a letter of intent for Franciscan Health Systems dba St. Clare Hospital (SCH). SCH proposes to establish a new dialysis facility in South Pierce County. This facility will have up to 21 stations. In accordance with WAC 246-310-080, the following information is provided:

1. A Description of the Extent of Services Proposed:

SCH is proposing to establish a new dialysis facility to be located in South Pierce County. This facility will provide incenter dialysis to end-stage renal patients.

2. <u>Estimated Cost of the Proposed Project</u>:

The capital expenditures are not expected to exceed \$2.75 million.

3. <u>Description of the Service Area:</u>

Per WAC, the service area is Pierce County. The primary service area for this dialysis center is South Pierce County.

Thank you for your support in this matter.

Sincerely,

James M. Good

Vice President, Specialty Services

A mission to heal, a promise to care.